Staple Issue Slip Here BEST AVAILABLE COPY **POSITION** ID NO. DATE CLASSIFIER **EXAMINER TYPIST** // VERIFIER 11 11 CORPS CORR. SPEC. HAND FILE MAINT. DRAFTING INDEX OF CLAIMS Claim Original 11/16/ 12/1 REPRESE 69 71 72 73 74 75 77 78 79 80 81 82 83 84 85 86 87 89 8 91 82 93 94 95 98 j 97 98

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